

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) CAMERON CRAIN Office (if applicable) NV STATE SENATE District (if applicable) 3
 Mailing Address (include city and zip code) 454 GLENMANOR DR. RENO 89509 Telephone No. 775.232.4974
 E-Mail Address cameroncrair@yahoo.com
 Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRY ☐ IND EXP ☐ AMENDED ☐ ANNUAL FILING

☐ Annual Filing - Due January 15, 2004
 Period: January 1, 2003 - December 31, 2003

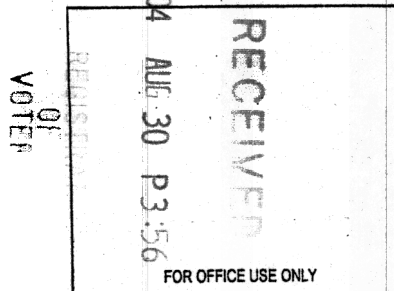
☒ Report #1 - Due August 31, 2004
 Incumbents in an Office with a 4-year term Period: Jan. 5, 2001 - Aug 26, 2004
 Incumbents in an Office with a 6-year term Period: Dec. 20, 1998 - Aug 26, 2004
 All others Period: Jan. 1, 2004 - Aug. 26, 2004
 Ballot Advocacy Groups (BAGs) only: Period: Dec. 5, 2002 - Aug 26, 2004

☐ Report #2 Due - October 26, 2004
 Period: Aug. 27, 2004 - Oct. 21, 2004

☐ Report #3 Due - January 15, 2005*
 Period: Oct. 22, 2004 - Dec. 31, 2004
 BAGs only: Period: Oct. 22, 2004 - Dec. 5, 2004

☐ Annual Filing - Due January 15, 2005
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* Third Report suffices for 2005 Annual Filing if candidate also filed Report Nos. 1 and 2



CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100
2. Total Monetary Contributions Received of \$100 or Less

This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
\$750.00	750.00
120.00	120.00

3. Total Amount of Monetary Contributions Received
(Add Lines 1 and 2)
4. Total Value of In Kind Contributions Received in Excess of \$100

This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
870.00	870.00
0	0

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100
6. Total Monetary Expenses Paid of \$100 or Less
7. Total Amount of All Monetary Expenses Paid
(Add Lines 5 and 6)
8. Total Value of In Kind Expenses in Excess of \$100

286.11	286.11
21.29	21.29
307.40	307.40
0	0

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature

EL201.doc

Revised: Jan-04

PAGE 1

Date

OF 7

8/30/04

CAMPAIGN CONTRIBUTIONS

Report Period # /

CAMERON CRAIN STATE SENATE 3
Name (print) Office (if applicable) District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
JOAN WALKER	6/22/04	\$250.00	
LINDA WALKER	6/22/04	50.00	
DAVID WARD	5/14/04	50.00	
SUSAN MAYES	7/24/04	150.00	
MARGE SILL	7/4/04	20.00	
SHARMILA BAGCHI	8/19/04	250.00	
STONEWALL DEMOCRATS	8/17/04	100.00	

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CAMPAIGN EXPENSES

Report Period # /

Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

**** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

CAMPAIGN EXPENSES

Report Period # /

Name (print) CAMERON CRAIN Office (if applicable) STATE SENATE District (if applicable) 3

Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
CAMERON CRAIN - REIMBURSEMENT (TRIPP PLASTICS, KINKO'S)	D	8/19/04	\$ 166.11
PAUL SHERMAN	D	8/19/04	120.00
SAVON	B	8/27/04	21.29

IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

**IN KIND CAMPAIGN
CONTRIBUTIONS**

Report Period # /


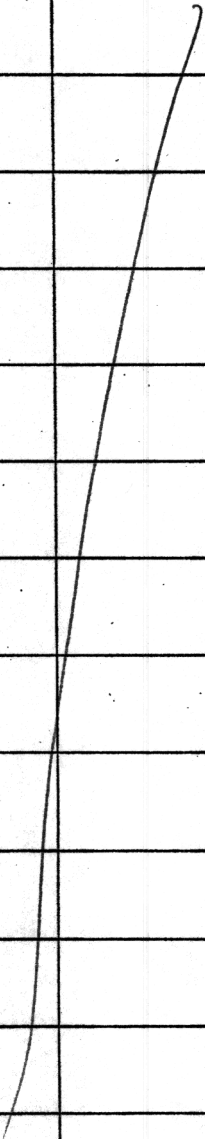
Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
				
				

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#

District (if applicable)

Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

PAGE 7 OF 7

DEAN HELLER
Secretary of State

STATE OF NEVADA

CHARLES E. MOORE
Securities Administrator

RENEE L. PARKER
Chief Deputy Secretary
of State

SCOTT W. ANDERSON
Deputy Secretary
for Commercial Recordings

PAMELA A. RUCKEL
Deputy Secretary for
Southern Nevada

RONDA L. MOORE
Deputy Secretary
for Elections



OFFICE OF THE
SECRETARY OF STATE

August 25, 2004

Dear Candidate/Elected Official:

I am confident that you share my conviction that campaign finance reporting should be complete and meaningful to promote open government and trust in our democratic process. It is critical that public disclosure of campaign finances be both transparent and understandable, not a pale imitation of the intent of the law. Unfortunately, the form approved by the Legislative Commission does not include information that is necessary to achieve meaningful disclosure of campaign contributions and expenses. Accordingly, as Secretary of State, I am requesting that you make voluntary disclosure of all your campaign funds, including beginning and ending balances, by submitting the following information and affixing your signature below.

Name: CAMERON GRAIN Office Sought or Held: STATE SENATE 3
Signature: [Signature] Date: 8/30/04

(A) Cash on Hand at **beginning** of this reporting period, which ends August 26, 2004: \$ Ø
(B) Interest and Income Earned on Contributions during this period: \$ Ø
(C) Total Amount of Monetary Contributions Received during this period: \$ 870
(Add figure in Line 3 of C & E Report to any Interest or Income earned)
(D) Total Amount of All Monetary Expenses Paid during this period: \$ 307.40
(Figure from Line 7 of C & E Report)
(E) Ending Cash on Hand on August 26, 2004: \$ 562.60

Thank you for taking the time to respond to our request. You have demonstrated your desire to have meaningful disclosure of your campaign contributions and expenses.

My office will be compiling a list of those candidates/elected officials who voluntarily provide full disclosure of campaign monies, as well as those who decline to do so, and this information will be posted on our website for the public to view.

Respectfully submitted,

DEAN HELLER
Secretary of State

LAS VEGAS OFFICES
555 E. Washington Avenue, 89101
SECURITIES: SUITE 5200
Telephone (702) 486-2440
Fax (702) 486-2452
CORPORATIONS: SUITE 4000
Telephone (702) 486-2880
Fax (702) 486-2888

MAIN OFFICE
101 N. Carson Street, Suite 3
Carson City, Nevada 89701
Telephone (775) 684-5708
Fax (775) 684-5725

**CORPORATE
SATELLITE OFFICE**
202 N. Carson Street
Carson City, Nevada 89701
Telephone (775) 684-5708
Fax (775) 684-5725

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT State of Nevada

Name (print) CAMERON CRAIN Office (if applicable) STATE SENATE W-3 District (if applicable) 232.4974
Mailing Address (include city and zip code) 454 Glenmar Dr. Reno 89509 Telephone No.
E-Mail Address cameron@yahoo.com

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL. PRY ☐ IND. EXP ☐ AMENDED ☐ ANNUAL FILING

- ☐ Annual Filing - Due January 15, 2004
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RECEIVED
10-26-04
FOR OFFICE USE ONLY

CONTRIBUTIONS SUMMARY

- Total Monetary Contributions Received in Excess of \$100
- 2. Total Monetary Contributions Received of \$100 or Less

This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
\$950	\$1,700
\$1,065	\$1,185

- 3. Total Amount of Monetary Contributions Received (Add Lines 1 and 2)
- 4. Total Value of In Kind Contributions Received in Excess of \$100

This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
\$2,015	\$2,885
\$537. ⁵¹	\$537. ⁵¹
\$1,606. ⁸²	\$1,892. ⁹³

EXPENSES SUMMARY

- 5. Total Monetary Expenses Paid in Excess of \$100
- 6. Total Monetary Expenses Paid of \$100 or Less
- 7. Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)
- 8. Total Value of In Kind Expenses in Excess of \$100

\$1,700	\$2,885
\$500	\$587. ⁰⁹
\$2,172. ⁸²	\$2,480. ²²
0	0

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

10/25/04

CAMPAIGN EXPENSES

Report Period # 2

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
OUTDOOR SIGNS	D	9/16/04	\$ 538. ⁰⁰
CAPITAL ONE	D	10/11/04	\$ 429. ⁴⁸
WASHOE COUNTY DEMOCRATIC PARTY	H	10/12/04	\$ 150. ⁰⁰
USPS	D	10/19/04	\$ 161. ⁰⁰
DIGI PRINT	D	10/18/04	\$ 328. ³⁴

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Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
MARILYN MELTON 2547 Edgerock Reno	9/29/04	PRINTING/AD "Dis: Riv"/AD	\$337.51	
MARILYN MELTON 2547 Edgerock Reno	9/29/04	WINE/SPECIAL EVENT	\$200.00	

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CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

CAMERON CRAIN

Name (print)

Office (if applicable)

District (if applicable)

Mailing Address (include city and zip code)

Telephone No.

E-Mail Address

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL. PRY ☐ IND. EXP ☐ AMENDED ☐ ANNUAL FILING☐ Annual Filing - Due January 15, 2004

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CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100

Total Monetary Contributions Received of \$100 or Less

This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
700-	2400-
0	1185-

3. Total Amount of Monetary Contributions Received
(Add Lines 1 and 2)

4. Total Value of In Kind Contributions Received in Excess of \$100

This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
0	537.51

700-	3,585-
------	--------

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100

6. Total Monetary Expenses Paid of \$100 or Less

7. Total Amount of All Monetary Expenses Paid
(Add Lines 5 and 6)

8. Total Value of In Kind Expenses in Excess of \$100

0	0
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434.28	2327.21
376.88	964.17
811.16	3291.38

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature

Date

PAGE 1 OF 1

Report Period # 3

CAMERON CRAIN

Name (print)

Office (if applicable)

District (if applicable)

**Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary**

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CAMPAIGN EXPENSESReport Period **#**

Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
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Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

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IN KIND CONTRIBUTIONS AND EXPENSES REPORT

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**IN KIND CAMPAIGN
EXPENSES**

Report Period #

Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Expenses in Excess of \$100

Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

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**IN KIND CAMPAIGN
CONTRIBUTIONS**

Report Period #

Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN

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